24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
FREEDOM COMMITTEE	C C00547984
	O State of the sta
Check if 24-hour report 48-hour report New report Amends report f	filed on M M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Freedom Committee x Buisness Expense, 4 entries	09 06 / Y Y Y Y Y
Mailing Address PO Box 6936	Amount
City State Zip Code	107.99
Colorado Springs CO 80934	Transaction ID : WFT2016861525-1 Date of Disbursement or Obligation
Purpose of Expenditure Buisness Expense Category/ Type 24	09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support O	office Sought: House District: 05
Ms. Chisesi M. Diane Pres Elect Oppose	President Senate State: CO
Odichadi Ical Io Dalc	isbursement For: ☐ Primary ☐ General O16 ▼ Other (specify) ► Buisness Expense
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support C	Office Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	0.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ms. Chisesi M. Diane Pres Elect [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	